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## \*BIBDATASHEET\*

CONFIRMATION NO. 62

Bib Data Sheet

SERIAL NUMBER 09/827,219	FILING DATE 04/05/2001  RULE	CLASS 455	GROUP ART UNIT 2645	ATTORNEY DCKE NO. CE08311R
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## APPLICANTS

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Wesley Stuart Jones, Palatine, IL; Raymond M. Liss, St. Charles, IL;  
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Howard Nodell, Buffalo Grove, IL;  
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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/195,723 04/07/2000

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/16/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____	STATE OR COUNTRY IL	SHEETS DRAWING 7	TOTAL CLAIMS 29	INDEPENDENT CLAIMS 6
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## ADDRESS

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## TITLE

Communication network and method for providing surveillance services

FILING FEE  RECEIVED 1242	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time <input type="checkbox"/> 1.18 Fees ( Issue )
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Bib Data Sheet

CONFIRMATION NO. 6206

<b>SERIAL NUMBER</b> 09/827,219	<b>FILING DATE</b> 04/05/2001 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2681	<b>ATTORNEY DOCKET NO.</b> CE08311R	
<b>APPLICANTS</b> William Michael Bondy, Chicago, IL; Robert Gerald Hug, Naperville, IL; Wesley Stuart Jones, Palatine, IL; Raymond M. Liss, St. Charles, IL; Timothy L. Moran, Island Lake, IL; Howard Nodell, Buffalo Grove, IL; Shmuel Silverman, Buffalo Grove, IL; Bruce Martin Wiatrak, Bolingbrook, IL;					
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/195,723 04/07/2000 <i>yes 02</i>					
<b>** FOREIGN APPLICATIONS *****</b> <i>none 02</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 05/16/2001</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Verified and <i>Quintin P. Scalante</i> Acknowledged <i>Examiner's Signature</i> Initials		<b>STATE OR COUNTRY</b> IL	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 29	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> 22917					
<b>TITLE</b> Communication network and method for providing surveillance services					
<b>FILING FEE RECEIVED</b> 1242	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		